້ to avoid p	PENALTY AND INTEREST CHARGES, Pay Tele	the regulatory assessment fee return muphone Service Provider Reg	ist be filled on or before 01/30/2002 gulatory Assessment Fe	RETURNAL	
	1.1	2001	+ 2002 pymt		
STATU	s: River	Florida Public Service (See Filing Instructions on Back	Commission	FOR PSC USE ONLY Check#_/237	
	Actual Return Estimated Return Amended Return	TG617-01-0-R Rudy B. Soriano 19370 Collins Avenue, #1412		\$ <u>/00.00</u> <u>\$_/2.50</u> <u>\$_0603002</u> 0603002 0603002 004011	
	D COVERED: 2001 TO 12/31/2001 SET DAT			\$I Postmark Date 7/23/02 Initials of Preparer	
D23					
	(Name of Company)	(Addı	ress)	(City/State) (Zip)	
LINE <u>NO.</u>		ACCOUNT CLASSIFICATION	1	AMOUNT	
1.	Gross Operating Rev	enue (Florida)		\$_O	
2.	Gross Intrastate Revenue			0	
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)				
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)			\$	
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)				
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)				
7.	Interest for Late Payr	nent (see "3. Failure to File by I	Due Date" on back)		
CAF	" TOTAL AMOUNT	DUE		\$ <u>50</u>	
	AS PROVIDE) IN SECTION 364.336 FLORIDA STA	TUTES, THE MINIMUM ANNU	AL FEE IS \$50	
CTR ECR GCL OPC	THIS FORM MUST BE C	OMPLETED AND RETURNED REGA	RDLESS OF THE AMOUNT OF	REVENUES REPORTED	
MMOS SEC 1 OTH	by this Return	hones in operation at close of pe	riod covered		
N t These an	$\beta_{1}\beta_{2}+\gamma_{1}\ell_{2}$	st be verifiable.			

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

(Signature of Company Official)	OULIER (Title)	<u> </u>
(Preparer of Form - Please Print Name)	Telephone Number (305) 794 888	7 Fax Number ()
(Teparer of Form - Trease Fruit Name) Se The Ne	F.E.I. No.	DOCUMENT NUMPER-DATE
,		07950 JUL 30 N
PSC/CMU-26 (Rev. 11/11/99)		FPSC-COMMISSION CLERK

1861 Paulding Ave. Apt. 2 Bronx, NY 10462 Home: (718) 8246199 Fax : (718) 8246199 Cell: (305) 7948887

July 23, 2002

Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

Attention: Paula J. Isler

Dear Paula,

This letter is to inform that I would like my certificate cancelled. I moved out of Florida. I did not install or operate the pay phones that I have purchased. I am also including in this letter a check for both 2001 and 2002 fees. I understand the fee for 2001 is higher due to penalty and interest. The "TG" code is TG617-01-0-R. Please let me know if you require additional information or have any questions. The best way to reach me is via cell phone (305) 7948887.

Sincerely,

ing fring

Rudy B. Soriano